

Debtor 1	<u>MYLES</u>	<u>ROBERT</u>	<u>WILLIAMS</u>
First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>MIDDLE</u> District of <u>N.C.</u>			
Case number (if known) _____			

FILED

APR 22 2019

STEPHANIE J. BUTLER, CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF NC

Check if this is an
amended filing

Official Form 103B**Application to Have the Chapter 7 Filing Fee Waived**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: Tell the Court About Your Family and Your Family's Income**1. What is the size of your family?**

Your family includes you, your spouse, and any dependents listed on *Schedule J: Your Expenses* (Official Form 106J).

Check all that apply:

- You
 Your spouse
 Your dependents

How many dependents? _____

Total number of people _____

2. Fill in your family's average monthly income.

Include your spouse's income if your spouse is living with you, even if your spouse is not filing.

Do not include your spouse's income if you are separated and your spouse is not filing with you.

That person's average monthly net income
(take-home pay) _____

You \$ _____ 0

Your spouse.... + \$ _____ 0

Subtotal..... \$ _____ 0

- \$ _____ 0

Subtract any non-cash governmental assistance that you included above.

Your family's average monthly net income

Total..... \$ _____ 0

3. Do you receive non-cash governmental assistance?

- No
 Yes. Describe.....

Type of assistance

--	--

4. Do you expect your family's average monthly net income to increase or decrease by more than 10% during the next 6 months?

- No
 Yes. Explain.

--	--

5. Tell the court why you are unable to pay the filing fee in installments within 120 days. If you have some additional circumstances that cause you to not be able to pay your filing fee in installments, explain them.

--	--

Debtor 1

MILES, ROBERT WILLIAMS

First Name Middle Name

Last Name

15. Other assets?

Do not include household items and clothing.

Describe the other assets:Current value: \$ 0Amount you owe on liens: \$ 0**16. Money or property due you?**

Examples: Tax refunds, past due or lump sum alimony, spousal support, child support, maintenance, divorce or property settlements, Social Security benefits, workers' compensation, personal injury recovery

Who owes you the money or property?**How much is owed?**

Do you believe you will likely receive payment in the next 180 days?

\$ 0 No\$ 0 Yes. Explain: _____**Part 4: Answer These Additional Questions**

17. Have you paid anyone for services for this case, including filling out this application, the bankruptcy filing package, or the schedules?

 No Yes. Whom did you pay? Check all that apply:

- An attorney
 A bankruptcy petition preparer, paralegal, or typing service
 Someone else _____

How much did you pay?

\$ _____

18. Have you promised to pay or do you expect to pay someone for services for your bankruptcy case?

 No Yes. Whom do you expect to pay? Check all that apply:

- An attorney
 A bankruptcy petition preparer, paralegal, or typing service
 Someone else _____

How much do you expect to pay?

\$ _____

19. Has anyone paid someone on your behalf for services for this case?

 No Yes. Who was paid on your behalf? Check all that apply:

- An attorney
 A bankruptcy petition preparer, paralegal, or typing service
 Someone else _____

Who paid? Check all that apply:

- Parent
 Brother or sister
 Friend
 Pastor or clergy
 Someone else _____

How much did someone else pay?

\$ _____

20. Have you filed for bankruptcy within the last 8 years?

 No Yes. District _____ When _____ Case number _____ MM/ DD/ YYYY

District _____ When _____ Case number _____ MM/ DD/ YYYY

District _____ When _____ Case number _____ MM/ DD/ YYYY

Part 5: Sign Below

By signing here under penalty of perjury, I declare that I cannot afford to pay the filing fee either in full or in installments. I also declare that the information I provided in this application is true and correct.

x Robert Williams

Signature of Debtor 1

x _____
 Signature of Debtor 2

Date 04 15 2019
 MM / DD / YYYYDate _____
 MM / DD / YYYY